## COMBINED DECEMPATION FOR PATENT APPLICATION A POWER OF ATTORNEY (Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER
21829/230 (EBC-15)

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

## METHOD OF IMPARTING DROUGHT RESISTANCE TO PLANTS

he specif	ication of which (check only	one item helow):		
[X]	is attached hereto.	one itali below).		
[]	was filed as U.S. Patent Application Serial No(if applicable).		on	_and was amended on
<del>f</del> ]	was filed as PCT International Application Number on (if applicable).		on	_ and was amended under PCT Article 19
	state that I have reviewed and nendment referred to above.	understand the contents of t	he above-identified specif	fications, including the claims, as amended
	ledge the duty to disclose information (ederal Regulations, § 1.56(a)		o the patentability of this a	application in accordance with Title 37,
my PCT below any other than	international application(s) do y application(s) for patent or i	esignating at least one count inventor's certificate or any	ry other than the United Si PCT international applicat	(s) for patent or inventor's certificate or tates listed below and have also identified tion(s) designating at least one country ag date before that of the application(s) of
PRIOR A	PPLICATION(S) AND ANY	PRIORITY CLAIMS UNI	DER 35 U.S.C. 119:	
(IF	COUNTRY PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
	United States	60/036,048	27-JAN-1997	[X] YES [ ] NO
				[]YES[]NO
	<del></del>			[]YES[]NO
				[]YES[]NO

## COMBINED DECEMPATION FOR PATENT APPLICATION AND FOR PATTORNEY (Continued) (Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER 21829/230 (EBC-15)

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT International filing date of this application:

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120:

U.S. APPLICATIONS			STATUS (Check One)			
U.S. APPLICATION NUMBER		U.S. F	U.S. FILING DATE		PENDING	ABANDONED
09/591	7,840	20-J	UNE-2000		X	
09/013,587		26-JAI	26-JANUARY-1998			
PCT APPLICATIONS DESIGNATING THE U.S.						
PCT APPLICATION NO.	PCT FILING DATE	U.S. SERIA ASSIGNED	AL NUMBERS O (if any)			

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. Michael L. Goldman, Registration No. 33,727; Joseph M. Noto, Registration No. 32,163; Ann R. Pokalsky, Registration No. 34,697; Gunnar G. Leinberg, Registration No. 35,584; Edwin V. Merkel, Registration No. 40,087; Georgia Evans, Registration No. 44,597; Alice Y. Choi, Registration No. 45,758; Andrew K. Gonsalves, Registration No. 48,145; Noreen L. Connolly, Registration No. 48,987; John Campa, Registration No. 49,014

NIXON PEABODY LLP M			Direct telephone calls to: Michael L. Goldman (716) 263-1304		
2 0 1	FULL NAME OF INVENTOR	FAMILY NAME Wei	FIRST GIVEN NAME  Zhong-Min	SECOND GIVEN NAME	
	RESIDENCE & CITIZENSHIP	CITY Kirkland	STATE/FOREIGN COUNTRY Washington	COUNTRY OF CITIZENSHIP United States	
	POST OFFICE ADDRESS	P.O. ADDRESS 6115 111 <sup>th</sup> Avenue	CITY Kirkland	STATE & ZIP CODE/COUNTRY Washington 98033/USA	
2 0 2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
	RESIDENCE & CITIZENSHIP	CITY	STATE/FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	P.O. ADDRESS	CITY	STATE & ZIP CODE/COUNTRY	
2 0 3	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
	RESIDENCE & CITIZENSHIP	CITY	STATE/FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	P.O. ADDRESS	CITY	STATE & ZIP CODE/COUNTRY	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
UNSIGNED		
DATE	DATE	DATE